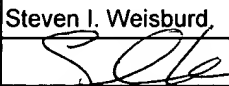


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FEE TRANSMITTAL for FY 2002				Complete if Known	
Patent fees are subject to annual revision.				Application Number	09/039,072
				Filing Date	March 13, 1998
				First Named Inventor	Atsushi Sasaki
				Examiner Name	Not Yet Assigned
				Group Art Unit	N/A
				Attorney Docket No.	W1878.0109/P109
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
TOTAL AMOUNT OF PAYMENT		(\$)		110.00	
METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)		
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account			3. ADDITIONAL FEES		
Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP			MAR 13 2002		
The Commissioner is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			Technology Center 2600		
FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity	Small Entity				
Fee Code	Fee Code	Fee Description	Fee Paid		
101 740	201 370	Utility filing fee			
106 330	206 165	Design filing fee			
107 510	207 255	Plant filing fee			
108 740	208 370	Reissue filing fee			
114 160	214 80	Provisional filing fee			
SUBTOTAL (1)		(\$)	0.00		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims -20** = x = Independent Claims -3** = x = Multiple Dependent = 					
Large Entity	Small Entity				
Fee Code	Fee Code	Fee Description	Fee Paid		
103 18	203 9	Claims in excess of 20			
102 84	202 42	Independent claims in excess of 3			
104 280	204 140	Multiple dependent claim, if not paid			
109 84	209 42	** Reissue independent claims over original patent			
110 18	210 9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)		(\$)	0.00		
**or number previously paid, if greater; For Reissues, see above					
			SUBTOTAL (3) (\$)		
			110.00		
SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	Steven I. Weisburd		Registration No. (Attorney/Agent)	27,409	
Signature			Telephone	(212) 896-5470	
			Date	March 6, 2002	